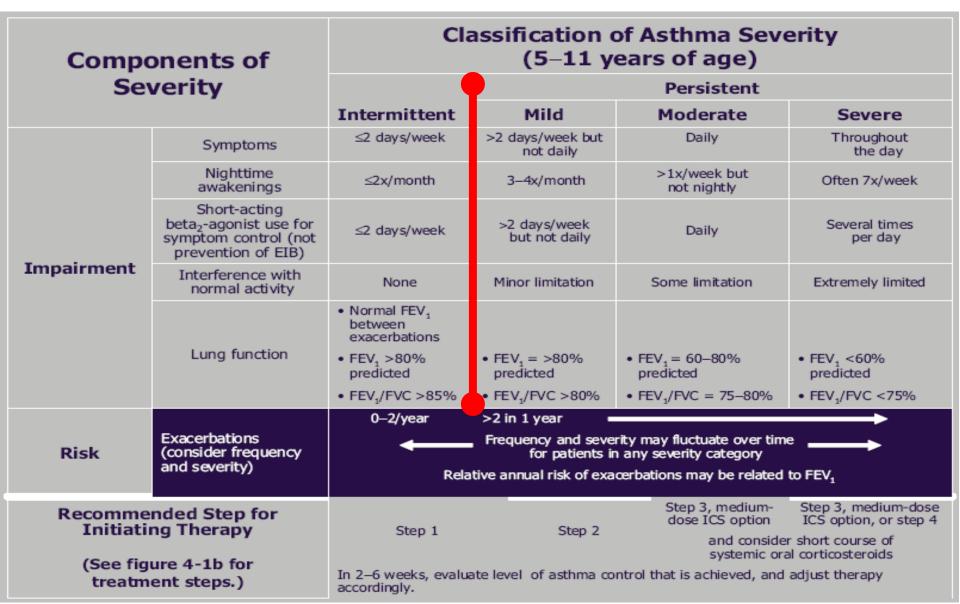
## Classification of Asthma Severity: Clinical Features Before Treatment

Components of Severity		Classification of Asthma Severity (0-4 years of age)						
		Persistent						
		Intermittent	Mild	Moderate	Severe			
Impairment	Symptoms	≤2 days/week	>2 days/week but not daily	Daily	Throughout the day			
	Nighttime awakenings	0	1–2x/month	3–4x/month	>1x/week			
	Short-acting beta <sub>2</sub> -agonist use for symptom control (not prevention of EIB)	≤2 days/week	>2 days/week but not daily	Daily	Several times per day			
	Interference with normal activity	None	Minor limitation	Some limitation	Extremely limited			
Risk	Exacerbations (consider frequency and severity)	≥2 exacerbations in 6 months requiring oral steroids, 0-1/year or ≥4 wheezing episodes/1 year lasting >1 day AND risk factors for persistent asthma						
		Frequency and severity may fluctuate over time						
Exacerbations of any severity may occur in patients in any severity category								
Recommended Step for Initiating Therapy		Step 1	Step 2		der short course of corticosteroids			
(See figure 4-1a for treatment steps.)		In 2–6 weeks, depending on severity, evaluate level of asthma control that is achieved. If no clear benefit is observed in 4–6 weeks, consider adjusting therapy or alternative diagnoses.						

## Classification of Asthma Severity: Clinical Features Before Treatment



## Classification of Asthma Severity: Clinical Features Before Treatment

Components of Severity		Classification of Asthma Severity ≥12 years of age				
		Intermittent	Mild	Moderate	Severe	
		Impairment  Normal FEV <sub>1</sub> /FVC: 8-19 yr 85% 20 -39 yr 80% 40 -59 yr 75% 60 -80 yr 70%	Symptoms	≤2 days/week	>2 days/week but not daily	Daily
Nighttime awakenings	≤2x/month		3–4x/month	>1x/week but not nightly	Often 7x/week	
Short-acting beta₂-agonist use for symptom control (not prevention of EIB)	≤2 days/week		>2 days/week but not > 1x/day	Daily	Several times per day	
Interference with normal activity	None		Minor limitation	Some limitation	Extremely limited	
Lung function	<ul> <li>Normal FEV<sub>1</sub> between exacerbations</li> </ul>					
	FEV <sub>1</sub> >80%     predicted		FEV <sub>1</sub> >80%     predicted	• FEV <sub>1</sub> >60% but <80% predicted	• FEV <sub>1</sub> < 60% predicted	
	• FEV <sub>1</sub> /FVC normal		• FEV <sub>1</sub> /FVC normal	• FEV <sub>1</sub> /FVC reduced 5%	• FEV <sub>1</sub> /FVC reduced >5%	
	Exacerbations (consider frequency and severity)	0-2/year >2/year				
Risk		Frequency and severity may fluctuate over time for patients in any severity category				
		Relative annual risk of exacerbations may be related to FEV <sub>1</sub>				
Recommended Step for Initiating Treatment			Step 2	Step 3	Step 4 or 5	
		Step 1		and consider short course of systemic oral corticosteroids		
(See figure 4–5 for treatment steps)  In 2–6 weeks, evaluate level of asthma control that is achieved an accordingly.					nd adjust therapy	